

<i>SERFF Tracking Number:</i>	<i>UHLC-126355845</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>UnitedHealthcare Insurance Company</i>	<i>State Tracking Number:</i>	<i>43902</i>
<i>Company Tracking Number:</i>	<i>AS2585S1</i>		
<i>TOI:</i>	<i>MS05G Group Medicare Supplement - Standard Sub-TOI:</i>		<i>MS05G.001 Plan A</i>
	<i>Plans</i>		
<i>Product Name:</i>	<i>Medicare Supplement</i>		
<i>Project Name/Number:</i>	<i>Portfolio Newspaper Ad/AS2585S1</i>		

## Filing at a Glance

Company: UnitedHealthcare Insurance Company

Product Name: Medicare Supplement

SERFF Tr Num: UHLC-126355845 State: Arkansas

TOI: MS05G Group Medicare Supplement -  
Standard Plans

SERFF Status: Closed-Filed

State Tr Num: 43902

Sub-TOI: MS05G.001 Plan A

Co Tr Num: AS2585S1

State Status: Filed-Closed

Filing Type: Advertisement

Reviewer(s): Stephanie Fowler

Author: Tammy Frederick

Disposition Date: 12/01/2009

Date Submitted: 10/26/2009

Disposition Status: Filed

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

## General Information

Project Name: Portfolio Newspaper Ad

Project Number: AS2585S1

Requested Filing Mode: File & Use

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Filing Status Changed: 12/01/2009

Status of Filing in Domicile: Pending

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Group

Group Market Size: Large

Group Market Type: Association

Explanation for Other Group Market Type:

State Status Changed: 12/01/2009

Created By: Tammy Frederick

Corresponding Filing Tracking Number:

AS2585S1

Deemer Date:

Submitted By: Tammy Frederick

Filing Description:

RE: UnitedHealthcare Insurance Company

AARP Medicare Supplement Advertising Material

Print Advertising

NAIC No: 0707-79413

File No: AS2585S1 (PLEASE USE THIS NUMBER IN ALL CORRESPONDENCE)

We enclose for your information and review, proof copies of advertising for use in connection with the AARP group health insurance program. This advertising is new and does not replace any material previously submitted to the

SERFF Tracking Number: UHLC-126355845 State: Arkansas  
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**Department.**

This print advertisement is an invitation to inquire that will be printed in various newspapers beginning in November 2009. The Policy Form Number GRP79171 GPS-1 will appear in the disclaimer paragraph on each of the attached advertising material.

When printed in newspapers the XXXs between the < > will be filled to announce local licensed-hosted Medicare Seminars sponsored by the AARP Medicare products. Once can go to a seminar for free and learn about any of the AARP Medicare products. Time and location vary from week to week and city to city.

The attached list of enclosures indicates the contents of each package including the form number, and title of each item.

We trust the enclosed forms are in order and look forward to your prompt acknowledgment of this filing. If you have any further questions you can contact me at 215-902-8444. If you prefer, you may also send a facsimile to me at Fax: 215-902-8813 or send an email to Susan\_J\_Cipollo@uhc.com.

Sincerely,

Susan J. Cipollo  
Director Marketing Compliance

SJC:tmf  
Enclosures

LIST OF ENCLOSURES  
Medicare Supplement Advertising  
Print Advertisements  
2009

AS2585S1 Print Ad

SERFF Tracking Number: UHLC-126355845 State: Arkansas  
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 Company Tracking Number: AS2585S1  
 TOI: MS05G Group Medicare Supplement - Standard Sub-TOI: MS05G.001 Plan A  
 Plans  
 Product Name: Medicare Supplement  
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## Company and Contact

### Filing Contact Information

Susan Cipollo, Director Susan\_J\_Cipollo@uhc.com  
 680 Blair Mill Rd. 215-902-8444 [Phone]  
 Horsham, PA 19044 215-902-8813 [FAX]

### Filing Company Information

UnitedHealthcare Insurance Company CoCode: 79413 State of Domicile: Connecticut  
 450 Columbus Boulevard Group Code: 707 Company Type: Life and Health  
 PO Box 150450 Group Name: State ID Number:  
 Hartford, CT 06115-0450 FEIN Number: 36-2739571  
 (860) 702-5000 ext. [Phone]

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## Filing Fees

Fee Required? Yes  
 Fee Amount: \$25.00  
 Retaliatory? No  
 Fee Explanation: per form  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
UnitedHealthcare Insurance Company	\$25.00	10/26/2009	31554234

*SERFF Tracking Number:* UHLC-126355845 *State:* Arkansas  
*Filing Company:* UnitedHealthcare Insurance Company *State Tracking Number:* 43902  
*Company Tracking Number:* AS2585S1  
*TOI:* MS05G Group Medicare Supplement - Standard Sub-TOI: MS05G.001 Plan A  
Plans  
*Product Name:* Medicare Supplement  
*Project Name/Number:* Portfolio Newspaper Ad/AS2585S1

## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Filed	Stephanie Fowler	12/01/2009	12/01/2009

SERFF Tracking Number:	UHLC-126355845	State:	Arkansas
Filing Company:	UnitedHealthcare Insurance Company	State Tracking Number:	43902
Company Tracking Number:	AS2585S1		
TOI:	MS05G Group Medicare Supplement - Standard Sub-TOI:		MS05G.001 Plan A
	Plans		
Product Name:	Medicare Supplement		
Project Name/Number:	Portfolio Newspaper Ad/AS2585S1		

## Disposition

Disposition Date: 12/01/2009

Implementation Date:

Status: Filed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: UHLC-126355845 State: Arkansas  
Filing Company: UnitedHealthcare Insurance Company State Tracking Number: 43902  
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TOI: MS05G Group Medicare Supplement - Standard Sub-TOI: MS05G.001 Plan A  
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Schedule Form	Schedule Item	Schedule Item Status	Public Access
	Print Ad	Filed	Yes

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Plans

Product Name: Medicare Supplement

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## Form Schedule

Lead Form Number: AS2585S1

Schedule Item Status	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
Filed 12/01/2009	AS2585S1	Advertising Print Ad	Initial		45.000	AS2585S1 newspaper ad w xxx.pdf

# Are you losing your employer's retiree health benefits?

**Making the right Medicare decision is important. Learn what an AARP® Medicare Plan from UnitedHealthcare could do for you.**

Join UnitedHealthcare for a meeting in your area to learn more about our Medicare Part D prescription drug plans, Medicare Supplement plans and Medicare Advantage plans.

<Date>, <Time>  
<Name of Venue>  
<City>, <State> <12345>

<Date>, <Time>  
<Name of Venue>  
<City>, <State> <12345>

<Date>, <Time>  
<Name of Venue>  
<City>, <State> <12345>

<Date>, <Time>  
<Name of Venue>  
<City>, <State> <12345>

**Space is limited. Call UnitedHealthcare to RSVP.**



**<1-800-xxx-xxxx>, TTY <711>**

**<8 a.m. to 8 p.m.>, <7 days a week>**

## A UnitedHealthcare® Medicare Solution

A sales person will be present with information and applications. For accommodation of persons with special needs at sales meetings, call 1-888-xxx-xxxx, TTY 711.

The family of AARP Medicare Plans includes Part D Prescription Drug Plans, Medicare Supplement Insurance Plans and Medicare Advantage Plans featuring the AARP® brand name. Plans are insured or covered by UnitedHealthcare Insurance Company or an affiliate, a Medicare Advantage organization **with a Medicare contract and a Medicare approved Part D sponsor.**

AARP and its affiliate are not insurance agencies or carriers and do not employ or endorse insurance agents, brokers, representatives or advisors. AARP does not recommend health related products, services, insurance or programs. You are strongly encouraged to evaluate your needs. The AARP® MedicareComplete® and AARP® MedicareRx plans carry the AARP name, and UnitedHealthcare pays a fee to AARP for use of the AARP trademark; you do not need to be an AARP member to enroll. The AARP® Medicare Supplement Insurance Plans carry the AARP name, and UnitedHealthcare pays a fee to AARP and its affiliate for use of the AARP trademark and other services. Amounts paid are used for the general purposes of AARP and its members. Neither AARP nor its affiliate is the insurer. **Medicare Supplement Insurance Plans are not connected with or endorsed by the U.S. Government or the federal Medicare program.** AARP Medicare Supplement Insurance Plans are insured by UnitedHealthcare Insurance Company, Horsham, PA (UnitedHealthcare Insurance Company of New York, Islandia, NY, for New York residents). Policy Form No. GRP 79171 GPS-1 (G-36000-4). Each insurer has sole responsibility for its own products. In some states plans may be available to persons eligible for Medicare by reason of disability. All plans may not be available in your state/area and for some plans you must reside in the plan's federally approved service area to obtain health care coverage. Call to receive complete information including benefits, costs, eligibility requirements, exclusions and limitations.

**This is a solicitation of insurance. A licensed agent may contact you.**